

111TH CONGRESS
1ST SESSION

H. R. 542

To amend titles XIX and XXI of the Social Security Act to permit States to rely on findings from an express plan agency to conduct simplified eligibility determinations under Medicaid and the State Children’s Health Insurance Program.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 14, 2009

Mr. PUTNAM introduced the following bill; which was referred to the
Committee on Energy and Commerce

A BILL

To amend titles XIX and XXI of the Social Security Act to permit States to rely on findings from an express plan agency to conduct simplified eligibility determinations under Medicaid and the State Children’s Health Insurance Program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Healthy Kids One Stop
5 Act”.

1 **SEC. 2. STATE OPTION TO RELY ON FINDINGS FROM AN EX-**
2 **PRESS LANE AGENCY TO CONDUCT SIM-**
3 **PLIFIED ELIGIBILITY DETERMINATIONS**
4 **UNDER MEDICAID AND SCHIP.**

5 (a) APPLICATION UNDER MEDICAID AND SCHIP.—

6 (1) MEDICAID.—Section 1902(e) of the Social
7 Security Act (42 U.S.C. 1396a(e)) is amended by
8 adding at the end the following:

9 “(13) EXPRESS LANE OPTION.—

10 “(A) IN GENERAL.—

11 “(i) OPTION TO USE A FINDING FROM
12 AN EXPRESS LANE AGENCY.—At the op-
13 tion of the State, the State plan may pro-
14 vide that in determining eligibility under
15 this title for a child (as defined in subpara-
16 graph (G)), the State may rely on a find-
17 ing made within a reasonable period (as
18 determined by the State) from an Express
19 Lane agency (as defined in subparagraph
20 (F)) when it determines whether a child
21 satisfies one or more components of eligi-
22 bility for medical assistance under this
23 title. The State may rely on a finding from
24 an Express Lane agency notwithstanding
25 any differences in budget unit, disregard,

1 deeming, or other methodology, if the fol-
2 lowing requirements are met:

3 “(I) PROHIBITION ON DETER-
4 MINING CHILDREN INELIGIBLE FOR
5 COVERAGE.—If a finding from an Ex-
6 press Lane agency would result in a
7 determination that a child does not
8 satisfy an eligibility requirement for
9 medical assistance under this title and
10 for child health assistance under title
11 XXI, the State shall determine eligi-
12 bility for assistance using its regular
13 procedures.

14 “(II) NOTICE REQUIREMENT.—
15 For any child who is found eligible for
16 medical assistance under the State
17 plan under this title or child health
18 assistance under title XXI and who is
19 subject to premiums based on an Ex-
20 press Lane agency’s finding of such
21 child’s income level, the State shall
22 provide notice that the child may
23 qualify for lower premium payments if
24 evaluated by the State using its reg-

1 ular policies and of the procedures for
2 requesting such an evaluation.

3 “(III) COMPLIANCE WITH
4 SCREEN AND ENROLL REQUIRE-
5 MENT.—The State shall satisfy the re-
6 quirements under subparagraphs (A)
7 and (B) of section 2102(b)(3) (relat-
8 ing to screen and enroll) before enroll-
9 ing a child in child health assistance
10 under title XXI. At its option, the
11 State may fulfill such requirements in
12 accordance with either option provided
13 under subparagraph (C) of this para-
14 graph.

15 “(IV) CODING.—The State meets
16 the requirements of subparagraph
17 (E).

18 “(ii) OPTION TO APPLY TO RENEWALS
19 AND REDETERMINATIONS.—The State may
20 apply the provisions of this paragraph
21 when conducting initial determinations of
22 eligibility, redeterminations of eligibility, or
23 both, as described in the State plan.

24 “(B) RULES OF CONSTRUCTION.—Nothing
25 in this paragraph shall be construed—

1 “(i) to limit or prohibit a State from
2 taking any actions otherwise permitted
3 under this title or title XXI in determining
4 eligibility for or enrolling children into
5 medical assistance under this title or child
6 health assistance under title XXI;

7 “(ii) to modify the limitations in sec-
8 tion 1902(a)(5) concerning the agencies
9 that may make a determination of eligi-
10 bility for medical assistance under this
11 title; or

12 “(iii) to modify the application of sec-
13 tions 1137(d), 1902(a)(46), 1903(i)(22),
14 or 1903(x).

15 “(C) OPTIONS FOR SATISFYING THE
16 SCREEN AND ENROLL REQUIREMENT.—

17 “(i) IN GENERAL.—With respect to a
18 child whose eligibility for medical assist-
19 ance under this title or for child health as-
20 sistance under title XXI has been evalu-
21 ated by a State agency using an income
22 finding from an Express Lane agency, a
23 State may carry out its duties under sub-
24 paragraphs (A) and (B) of section
25 2102(b)(3) (relating to screen and enroll)

1 in accordance with either clause (ii) or
2 clause (iii).

3 “(ii) ESTABLISHING A SCREENING
4 THRESHOLD.—

5 “(I) IN GENERAL.—Under this
6 clause, the State establishes a screen-
7 ing threshold set as a percentage of
8 the Federal poverty level that exceeds
9 the highest income threshold applica-
10 ble under this title to the child by a
11 minimum of 30 percentage points or,
12 at State option, a higher number of
13 percentage points that reflects the
14 value (as determined by the State and
15 described in the State plan) of any
16 differences between income methodolo-
17 gies used by the program adminis-
18 tered by the Express Lane agency and
19 the methodologies used by the State
20 in determining eligibility for medical
21 assistance under this title.

22 “(II) CHILDREN WITH INCOME
23 NOT ABOVE THRESHOLD.—If the in-
24 come of a child does not exceed the
25 screening threshold, the child is

1 deemed to satisfy the income eligi-
2 bility criteria for medical assistance
3 under this title regardless of whether
4 such child would otherwise satisfy
5 such criteria.

6 “(III) CHILDREN WITH INCOME
7 ABOVE THRESHOLD.—If the income of
8 a child exceeds the screening thresh-
9 old, the child shall be considered to
10 have an income above the Medicaid
11 applicable income level described in
12 section 2110(b)(4) and to satisfy the
13 requirement under section
14 2110(b)(1)(C) (relating to the re-
15 quirement that CHIP matching funds
16 be used only for children not eligible
17 for Medicaid). If such a child is en-
18 rolled in child health assistance under
19 title XXI, the State shall provide the
20 parent, guardian, or custodial relative
21 with the following:

22 “(aa) Notice that the child
23 may be eligible to receive medical
24 assistance under the State plan
25 under this title if evaluated for

1 such assistance under the State’s
2 regular procedures and notice of
3 the process through which a par-
4 ent, guardian, or custodial rel-
5 ative can request that the State
6 evaluate the child’s eligibility for
7 medical assistance under this
8 title using such regular proce-
9 dures.

10 “(bb) A description of dif-
11 ferences between the medical as-
12 sistance provided under this title
13 and child health assistance under
14 title XXI, including differences in
15 cost-sharing requirements and
16 covered benefits.

17 “(iii) TEMPORARY ENROLLMENT IN
18 CHIP PENDING SCREEN AND ENROLL.—

19 “(I) IN GENERAL.—Under this
20 clause, a State enrolls a child in child
21 health assistance under title XXI for
22 a temporary period if the child ap-
23 pears eligible for such assistance
24 based on an income finding by an Ex-
25 press Lane agency.

1 “(II) DETERMINATION OF ELIGI-
2 BILITY.—During such temporary en-
3 rollment period, the State shall deter-
4 mine the child’s eligibility for child
5 health assistance under title XXI or
6 for medical assistance under this title
7 in accordance with this clause.

8 “(III) PROMPT FOLLOW UP.—In
9 making such a determination, the
10 State shall take prompt action to de-
11 termine whether the child should be
12 enrolled in medical assistance under
13 this title or child health assistance
14 under title XXI pursuant to subpara-
15 graphs (A) and (B) of section
16 2102(b)(3) (relating to screen and en-
17 roll).

18 “(IV) REQUIREMENT FOR SIM-
19 PLIFIED DETERMINATION.—In mak-
20 ing such a determination, the State
21 shall use procedures that, to the max-
22 imum feasible extent, reduce the bur-
23 den imposed on the individual of such
24 determination. Such procedures may
25 not require the child’s parent, guard-

1 ian, or custodial relative to provide or
2 verify information that already has
3 been provided to the State agency by
4 an Express Lane agency or another
5 source of information unless the State
6 agency has reason to believe the infor-
7 mation is erroneous.

8 “(V) AVAILABILITY OF CHIP
9 MATCHING FUNDS DURING TEM-
10 PORARY ENROLLMENT PERIOD.—Med-
11 ical assistance for items and services
12 that are provided to a child enrolled in
13 title XXI during a temporary enroll-
14 ment period under this clause shall be
15 treated as child health assistance
16 under such title.

17 “(D) OPTION FOR AUTOMATIC ENROLL-
18 MENT.—

19 “(i) IN GENERAL.—The State may
20 initiate and determine eligibility for med-
21 ical assistance under the State Medicaid
22 plan or for child health assistance under
23 the State CHIP plan without a program
24 application from, or on behalf of, the child
25 based on data obtained from sources other

1 than the child (or the child’s family), but
2 a child can only be automatically enrolled
3 in the State Medicaid plan or the State
4 CHIP plan if the child or the family af-
5 firmatively consents to being enrolled
6 through affirmation and signature on an
7 Express Lane agency application, if the re-
8 quirement of clause (ii) is met.

9 “(ii) INFORMATION REQUIREMENT.—

10 The requirement of this clause is that the
11 State informs the parent, guardian, or cus-
12 todial relative of the child of the services
13 that will be covered, appropriate methods
14 for using such services, premium or other
15 cost sharing charges (if any) that apply,
16 medical support obligations (under section
17 1912(a)) created by enrollment (if applica-
18 ble), and the actions the parent, guardian,
19 or relative must take to maintain enroll-
20 ment and renew coverage.

21 “(E) CODING; APPLICATION TO ENROLL-
22 MENT ERROR RATES.—

23 “(i) IN GENERAL.—For purposes of
24 subparagraph (A)(iv), the requirement of

1 this subparagraph for a State is that the
2 State agrees to—

3 “(I) assign such codes as the
4 Secretary shall require to the children
5 who are enrolled in the State Med-
6 icaid plan or the State CHIP plan
7 through reliance on a finding made by
8 an Express Lane agency for the dura-
9 tion of the State’s election under this
10 paragraph;

11 “(II) annually provide the Sec-
12 retary with a statistically valid sample
13 (that is approved by Secretary) of the
14 children enrolled in such plans
15 through reliance on such a finding by
16 conducting a full Medicaid eligibility
17 review of the children identified for
18 such sample for purposes of deter-
19 mining an eligibility error rate (as de-
20 scribed in clause (iv)) with respect to
21 the enrollment of such children (and
22 shall not include such children in any
23 data or samples used for purposes of
24 complying with a Medicaid Eligibility
25 Quality Control (MEQC) review or a

1 payment error rate measurement
2 (PERM) requirement);

3 “(III) submit the error rate de-
4 termined under subclause (II) to the
5 Secretary;

6 “(IV) if such error rate exceeds 3
7 percent for either of the first 2 fiscal
8 years in which the State elects to
9 apply this paragraph, demonstrate to
10 the satisfaction of the Secretary the
11 specific corrective actions implemented
12 by the State to improve upon such
13 error rate; and

14 “(V) if such error rate exceeds 3
15 percent for any fiscal year in which
16 the State elects to apply this para-
17 graph, a reduction in the amount oth-
18 erwise payable to the State under sec-
19 tion 1903(a) for quarters for that fis-
20 cal year, equal to the total amount of
21 erroneous excess payments determined
22 for the fiscal year only with respect to
23 the children included in the sample
24 for the fiscal year that are in excess

1 of a 3 percent error rate with respect
2 to such children.

3 “(ii) NO PUNITIVE ACTION BASED ON
4 ERROR RATE.—The Secretary shall not
5 apply the error rate derived from the sam-
6 ple under clause (i) to the entire popu-
7 lation of children enrolled in the State
8 Medicaid plan or the State CHIP plan
9 through reliance on a finding made by an
10 Express Lane agency, or to the population
11 of children enrolled in such plans on the
12 basis of the State’s regular procedures for
13 determining eligibility, or penalize the
14 State on the basis of such error rate in any
15 manner other than the reduction of pay-
16 ments provided for under clause (i)(V).

17 “(iii) RULE OF CONSTRUCTION.—
18 Nothing in this paragraph shall be con-
19 strued as relieving a State that elects to
20 apply this paragraph from being subject to
21 a penalty under section 1903(u), for pay-
22 ments made under the State Medicaid plan
23 with respect to ineligible individuals and
24 families that are determined to exceed the
25 error rate permitted under that section (as

1 determined without regard to the error
2 rate determined under clause (i)(II)).

3 “(iv) ERROR RATE DEFINED.—In this
4 subparagraph, the term ‘error rate’ means
5 the rate of erroneous excess payments for
6 medical assistance (as defined in section
7 1903(u)(1)(D)) for the period involved, ex-
8 cept that such payments shall be limited to
9 individuals for which eligibility determina-
10 tions are made under this paragraph and
11 except that in applying this paragraph
12 under title XXI, there shall be substituted
13 for references to provisions of this title cor-
14 responding provisions within title XXI.

15 “(F) EXPRESS LANE AGENCY.—

16 “(i) IN GENERAL.—In this paragraph,
17 the term ‘Express Lane agency’ means a
18 public agency that—

19 “(I) is determined by the State
20 Medicaid agency or the State CHIP
21 agency (as applicable) to be capable of
22 making the determinations of one or
23 more eligibility requirements described
24 in subparagraph (A)(i);

1 “(II) is identified in the State
2 Medicaid plan or the State CHIP
3 plan; and

4 “(III) notifies the child’s fam-
5 ily—

6 “(aa) of the information
7 which shall be disclosed in ac-
8 cordance with this paragraph;

9 “(bb) that the information
10 disclosed will be used solely for
11 purposes of determining eligi-
12 bility for medical assistance
13 under the State Medicaid plan or
14 for child health assistance under
15 the State CHIP plan; and

16 “(cc) that the family may
17 elect to not have the information
18 disclosed for such purposes; and

19 “(IV) enters into, or is subject
20 to, an interagency agreement to limit
21 the disclosure and use of the informa-
22 tion disclosed.

23 “(ii) INCLUSION OF SPECIFIC PUBLIC
24 AGENCIES.—Such term includes the fol-
25 lowing:

1 “(I) A public agency that deter-
2 mines eligibility for assistance under
3 any of the following:

4 “(aa) The temporary assist-
5 ance for needy families program
6 funded under part A of title IV.

7 “(bb) A State program
8 funded under part D of title IV.

9 “(cc) The State Medicaid
10 plan.

11 “(dd) The State CHIP plan.

12 “(ee) The supplemental nu-
13 trition assistance program under
14 the Food and Nutrition Act of
15 2008 (7 U.S.C. 2011 et seq.).

16 “(ff) The Head Start Act
17 (42 U.S.C. 9801 et seq.).

18 “(gg) The Richard B. Rus-
19 sell National School Lunch Act
20 (42 U.S.C. 1751 et seq.).

21 “(hh) The Child Nutrition
22 Act of 1966 (42 U.S.C. 1771 et
23 seq.).

1 “(ii) The Child Care and
2 Development Block Grant Act of
3 1990 (42 U.S.C. 9858 et seq.).

4 “(jj) The Stewart B. McKin-
5 ney Homeless Assistance Act (42
6 U.S.C. 11301 et seq.).

7 “(kk) The United States
8 Housing Act of 1937 (42 U.S.C.
9 1437 et seq.).

10 “(ll) The Native American
11 Housing Assistance and Self-De-
12 termination Act of 1996 (25
13 U.S.C. 4101 et seq.).

14 “(II) A State-specified govern-
15 mental agency that has fiscal liability
16 or legal responsibility for the accuracy
17 of the eligibility determination find-
18 ings relied on by the State.

19 “(III) A public agency that is
20 subject to an interagency agreement
21 limiting the disclosure and use of the
22 information disclosed for purposes of
23 determining eligibility under the State
24 Medicaid plan or the State CHIP
25 plan.

1 “(iii) EXCLUSIONS.—Such term does
2 not include an agency that determines eli-
3 gibility for a program established under
4 the Social Services Block Grant established
5 under title XX or a private, for-profit or-
6 ganization.

7 “(iv) RULES OF CONSTRUCTION.—
8 Nothing in this paragraph shall be con-
9 strued as—

10 “(I) exempting a State Medicaid
11 agency from complying with the re-
12 quirements of section 1902(a)(4) re-
13 lating to merit-based personnel stand-
14 ards for employees of the State Med-
15 icaid agency and safeguards against
16 conflicts of interest); or

17 “(II) authorizing a State Med-
18 icaid agency that elects to use Ex-
19 press Lane agencies under this sub-
20 paragraph to use the Express Lane
21 option to avoid complying with such
22 requirements for purposes of making
23 eligibility determinations under the
24 State Medicaid plan.

1 “(v) ADDITIONAL DEFINITIONS.—In
2 this paragraph:

3 “(I) STATE.—The term ‘State’
4 means 1 of the 50 States or the Dis-
5 trict of Columbia.

6 “(II) STATE CHIP AGENCY.—The
7 term ‘State CHIP agency’ means the
8 State agency responsible for admin-
9 istering the State CHIP plan.

10 “(III) STATE CHIP PLAN.—The
11 term ‘State CHIP plan’ means the
12 State child health plan established
13 under title XXI and includes any
14 waiver of such plan.

15 “(IV) STATE MEDICAID AGEN-
16 CY.—The term ‘State Medicaid agen-
17 cy’ means the State agency respon-
18 sible for administering the State Med-
19 icaid plan.

20 “(V) STATE MEDICAID PLAN.—
21 The term ‘State Medicaid plan’ means
22 the State plan established under title
23 XIX and includes any waiver of such
24 plan.

“(G) CHILD DEFINED.—For purposes of this paragraph, the term ‘child’ means an individual under 19 years of age, or, at the option of a State, such higher age, not to exceed 21 years of age, as the State may elect.

“(H) APPLICATION.—This paragraph shall not apply to with respect to eligibility determinations made after September 30, 2014.

“(I) CONTINUED APPLICATION.—”.

(2) CHIP.—Section 2107(e)(1) of such Act (42 U.S.C. 1397gg(e)(1)) is amended by redesignating subparagraphs (B), (C), and (D) as subparagraphs (C), (D), and (E), respectively, and by inserting after subparagraph (A) the following new subparagraph:

“(B) Section 1902(e)(13) (relating to the State option to rely on findings from an Express Lane agency to help evaluate a child’s eligibility for medical assistance).”.

(b) EVALUATION AND REPORT.—

(1) EVALUATION.—The Secretary shall conduct, by grant, contract, or interagency agreement, a comprehensive, independent evaluation of the option provided under the amendments made by sub-

1 section (a). Such evaluation shall include an analysis
2 of the effectiveness of the option, and shall include—

3 (A) obtaining a statistically valid sample of
4 the children who were enrolled in the State
5 Medicaid plan or the State CHIP plan through
6 reliance on a finding made by an Express Lane
7 agency and determining the percentage of chil-
8 dren who were erroneously enrolled in such
9 plans;

10 (B) determining whether enrolling children
11 in such plans through reliance on a finding
12 made by an Express Lane agency improves the
13 ability of a State to identify and enroll low-in-
14 come, uninsured children who are eligible but
15 not enrolled in such plans;

16 (C) evaluating the administrative costs or
17 savings related to identifying and enrolling chil-
18 dren in such plans through reliance on such
19 findings, and the extent to which such costs dif-
20 fer from the costs that the State otherwise
21 would have incurred to identify and enroll low-
22 income, uninsured children who are eligible but
23 not enrolled in such plans; and

24 (D) any recommendations for legislative or
25 administrative changes that would improve the

1 effectiveness of enrolling children in such plans
2 through reliance on such findings.

3 (2) REPORT TO CONGRESS.—Not later than
4 September 30, 2013, the Secretary shall submit a
5 report to Congress on the results of the evaluation
6 under paragraph (1).

7 (3) FUNDING.—

8 (A) IN GENERAL.—Out of any funds in the
9 Treasury not otherwise appropriated, there is
10 appropriated to the Secretary to carry out the
11 evaluation under this subsection \$5,000,000 for
12 the period of fiscal years 2010 through 2013.

13 (B) BUDGET AUTHORITY.—Subparagraph
14 (A) constitutes budget authority in advance of
15 appropriations Act and represents the obliga-
16 tion of the Federal Government to provide for
17 the payment of such amount to conduct the
18 evaluation under this subsection.

19 (c) ELECTRONIC TRANSMISSION OF INFORMATION.—
20 Section 1902 of such Act (42 U.S.C. 1396a) is amended
21 by adding at the end the following new subsection:

22 “(dd) ELECTRONIC TRANSMISSION OF INFORMA-
23 TION.—If the State agency determining eligibility for med-
24 ical assistance under this title or child health assistance
25 under title XXI verifies an element of eligibility based on

1 information from an Express Lane Agency (as defined in
 2 subsection (e)(13)(F)), or from another public agency,
 3 then the applicant's signature under penalty of perjury
 4 shall not be required as to such element. Any signature
 5 requirement for an application for medical assistance may
 6 be satisfied through an electronic signature, as defined in
 7 section 1710(1) of the Government Paperwork Elimini-
 8 nation Act (44 U.S.C. 3504 note). The requirements of
 9 subparagraphs (A) and (B) of section 1137(d)(2) may be
 10 met through evidence in digital or electronic form.”.

11 (d) AUTHORIZATION OF INFORMATION DISCLO-
 12 SURE.—

13 (1) IN GENERAL.—Title XIX of the Social Se-
 14 curity Act is amended by adding at the end the fol-
 15 lowing new section:

16 **“SEC. 1942. AUTHORIZATION TO RECEIVE RELEVANT IN-**
 17 **FORMATION.**

18 “(a) IN GENERAL.—Notwithstanding any other pro-
 19 vision of law, a Federal or State agency or private entity
 20 in possession of the sources of data directly relevant to
 21 eligibility determinations under this title (including eligi-
 22 bility files maintained by Express Lane agencies described
 23 in section 1902(e)(13)(F), information described in para-
 24 graph (2) or (3) of section 1137(a), vital records informa-
 25 tion about births in any State, and information described

1 in sections 453(i) and 1902(a)(25)(I)) is authorized to
2 convey such data or information to the State agency ad-
3 ministering the State plan under this title, to the extent
4 such conveyance meets the requirements of subsection (b).

5 “(b) REQUIREMENTS FOR CONVEYANCE.—Data or
6 information may be conveyed pursuant to subsection (a)
7 only if the following requirements are met:

8 “(1) The individual whose circumstances are
9 described in the data or information (or such indi-
10 vidual’s parent, guardian, caretaker relative, or au-
11 thorized representative) has either provided advance
12 consent to disclosure or has not objected to disclo-
13 sure after receiving advance notice of disclosure and
14 a reasonable opportunity to object.

15 “(2) Such data or information are used solely
16 for the purposes of—

17 “(A) identifying individuals who are eligi-
18 ble or potentially eligible for medical assistance
19 under this title and enrolling or attempting to
20 enroll such individuals in the State plan; and

21 “(B) verifying the eligibility of individuals
22 for medical assistance under the State plan.

23 “(3) An interagency or other agreement, con-
24 sistent with standards developed by the Secretary—

1 “(A) prevents the unauthorized use, disclo-
2 sure, or modification of such data and other-
3 wise meets applicable Federal requirements
4 safeguarding privacy and data security; and

5 “(B) requires the State agency admin-
6 istering the State plan to use the data and in-
7 formation obtained under this section to seek to
8 enroll individuals in the plan.

9 “(c) PENALTIES FOR IMPROPER DISCLOSURE.—

10 “(1) CIVIL MONEY PENALTY.—A private entity
11 described in the subsection (a) that publishes, dis-
12 closes, or makes known in any manner, or to any ex-
13 tent not authorized by Federal law, any information
14 obtained under this section is subject to a civil
15 money penalty in an amount equal to \$10,000 for
16 each such unauthorized publication or disclosure.
17 The provisions of section 1128A (other than sub-
18 sections (a) and (b) and the second sentence of sub-
19 section (f)) shall apply to a civil money penalty
20 under this paragraph in the same manner as such
21 provisions apply to a penalty or proceeding under
22 section 1128A(a).

23 “(2) CRIMINAL PENALTY.—A private entity de-
24 scribed in the subsection (a) that willfully publishes,
25 discloses, or makes known in any manner, or to any

1 extent not authorized by Federal law, any informa-
 2 tion obtained under this section shall be fined not
 3 more than \$10,000 or imprisoned not more than 1
 4 year, or both, for each such unauthorized publication
 5 or disclosure.

6 “(d) RULE OF CONSTRUCTION.—The limitations and
 7 requirements that apply to disclosure pursuant to this sec-
 8 tion shall not be construed to prohibit the conveyance or
 9 disclosure of data or information otherwise permitted
 10 under Federal law (without regard to this section).”.

11 (2) CONFORMING AMENDMENT TO TITLE XXI.—
 12 Section 2107(e)(1) of such Act (42 U.S.C.
 13 1397gg(e)(1)), as amended by subsection (a)(2), is
 14 amended by adding at the end the following new
 15 subparagraph:

16 “(F) Section 1942 (relating to authoriza-
 17 tion to receive data directly relevant to eligi-
 18 bility determinations).”.

19 (3) CONFORMING AMENDMENT TO PROVIDE AC-
 20 CESS TO DATA ABOUT ENROLLMENT IN INSURANCE
 21 FOR PURPOSES OF EVALUATING APPLICATIONS AND
 22 FOR CHIP.—Section 1902(a)(25)(I)(i) of such Act
 23 (42 U.S.C. 1396a(a)(25)(I)(i)) is amended—

24 (A) by inserting “(and, at State option, in-
 25 dividuals who apply or whose eligibility for med-

1 ical assistance is being evaluated in accordance
 2 with section 1902(e)(13)(D))” after “with re-
 3 spect to individuals who are eligible”; and

4 (B) by inserting “under this title (and, at
 5 State option, child health assistance under title
 6 XXI)” after “the State plan”.

7 (e) AUTHORIZATION FOR STATES ELECTING EX-
 8 PRESS LANE OPTION TO RECEIVE CERTAIN DATA DI-
 9 RECTLY RELEVANT TO DETERMINING ELIGIBILITY AND
 10 CORRECT AMOUNT OF ASSISTANCE.—The Secretary of
 11 Health and Human Services shall enter into such agree-
 12 ments as are necessary to permit a State that elects the
 13 Express Lane option under section 1902(e)(13) of the So-
 14 cial Security Act to receive data directly relevant to eligi-
 15 bility determinations and determining the correct amount
 16 of benefits under a State child health plan under title XXI
 17 of the Social Security Act or a State plan under title XIX
 18 of such Act from the following:

19 (1) The National Directory of New Hires estab-
 20 lished under section 453(i) of the Social Security
 21 Act (42 U.S.C. 653(i)).

22 (2) Data regarding enrollment in insurance that
 23 may help to facilitate outreach and enrollment under
 24 the State Medicaid plan, the State child health plan,

1 and such other programs as the Secretary may
2 specify.

3 (f) EFFECTIVE DATE.—The amendments made by
4 this section are effective on January 1, 2010.

○